

## PART B - FEE(S) TRANSMITTAL

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## Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop 1850/FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

<i>John C. Gorecki</i>	(Depositor's name)
<i>John C. Gorecki</i>	(Signature)
<i>2-24-10</i>	(Date)

34645 2500 11/24/2009  
Anderson Gorecki & Manaras, LLP  
Attn: John C. Gorecki  
P.O. BOX 553  
CARLSLE, MA 01741

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
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10/777,697 02/12/2004 Bruce Schofield 111-152 5707

TITLE OF INVENTION: METHOD AND APPARATUS FOR FACILITATING THE TRANSPORTATION OF MEDICAL IMAGES ON A COMMUNICATION NETWORK

APPLN. TYPE	SMALL ENTITY	BRIEF FEE DUE	PUBLICATION FEE DUE	PRIVY PAID BONUS REF	TOTAL FEE(S) DUE	DATE DUE
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nonprovisional NO \$1510 \$300 \$0 \$1810 02/24/2010

EXAMINER	ART UNIT	CLASS/SUBCLASS
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DONAGHUE, LARRY D 2454 709-205000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363)

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/422) attached.  
☒ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/427; Rev 02-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent from page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 6 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. *Anderson Gorecki*  
2. *J Manaras LLP*  
3.

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY AND STATE OR COUNTRY)

*Avaya, Inc.*

*Basking Ridge, NJ*

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are submitted:

- ☒ Issue Fee  
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☐ Advance Order - # of Copies

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5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant: a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

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Date

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Registration No.

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